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Bib Data Sheet

CONFIRMATION NO. 5532

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|--|--|-------------------------------|---|-------------------------------------|
| SERIAL NUMBER 09/960,416 | FILING DATE 09/21/2001 RULE | CLASS 705 | GROUP ART UNIT 2161 | ATTORNEY DOCKET NO. 65507 |
| APPLICANTS Robert M. Dombroski, Sanford, FL; | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/234,096 09/21/2000 ok✓ PC | | | | |
| ** FOREIGN APPLICATIONS ***** -none- PC | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/19/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Altozano</i> Verified and Acknowledged <i>PC</i> Examiner's Signature Initials | | STATE OR COUNTRY FL | SHEETS DRAWING 19 | TOTAL CLAIMS 29 |
| | | | | INDEPENDENT CLAIMS 3 |
| ADDRESS 27975 | | | | |
| TITLE System and associated methods for providing claimant services with increased quality assurance | | | | |
| FILING FEE RECEIVED 872 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |